

TESTIMONY OF RABBI ZALMAN GERBER

Before the U.S. Senate Special Committee on Aging

May 19, 2003

Brief historical sketch of Penny Gerber's illness and ongoing treatment, as recorded by Rabbi Zalman Gerber, her son.

Penny Gerber and her husband, Solomon, were married for 46 years, and lived in Long Beach, CA.

1996 – Penny started to exhibit early signs of depression at approximately the same time that Solomon's health started to decline.

mid-1998 – Penny was exhibiting advanced signs of deep depression. Solomon was himself too ill to deal appropriately with her illness, but refused repeated offers of assistance from their children.

January 1999 – Solomon died. Penny's situation rapidly deteriorated into very deep depression, being unable to speak or communicate, and behavior turning psychotic and self-damaging. Her children were at a loss as to how to proceed and where to turn. They decided to follow their parents expressed wishes to keep Penny at home with a hired companion. 2 of her daughters who lived in Southern CA made Herculean efforts to try to tend to her ongoing needs. They took her periodically to a psychiatrist, who prescribed an extremely strong antidepressant medication. She continued her rapid deterioration.

October 1999 – Her children decided that Penny must be institutionalized, but had nowhere to turn for guidance. They found an assisted living facility in Los Angeles that was willing to accept her; however, in retrospect, the facility was completely incapable of tending to her urgent need of intense psychiatric treatment. Penny continued her rapid deterioration.

February 2000 – In order to relieve his emotionally exhausted sisters in CA, her son in Philadelphia brought her for a visit / long term stay to his home. Within days, he and his wife decided that she was incapable of tending to her own physical needs, and was immediately hospitalized. She stayed in the hospital for approximately 3 weeks, being treated for severe hypothyroidism and malnutrition. These medical problems had gone undiagnosed and untreated, possibly for years.

March 2000 – Penny was moved to a nearby assisted living facility just outside of Philadelphia. She was still unable to speak or communicate, and her behavior was still psychotic and self-damaging. Unable to care for her, she was transferred from the assisted living floor to the Alzheimer's unit.

April 2000 – It was determined by the attending psychiatric staff that Penny urgently needed more intensive psychiatric care, and must be moved from their facility to a psychiatric ward in a hospital for intense treatment. She was transferred to the Hospital at the University of PA.

She stayed on the floor of the ward for approximately 6 weeks and underwent biweekly shock treatments and daily therapy. By June, she was able to recognize and hold a simple conversation with her son.

July 2000 – Penny moved back to her son's home, where she continued daily outpatient therapy throughout the summer. She started to volunteer at the local library.

December 2001 – Penny had a minor stroke, leaving her weakened on the left side of her body. She was hospitalized for intense physical therapy. She was then transferred to a local nursing home.

April 2002 – She returned to her son's home, being aided daily by a private nurse.

October 2002 – Penny was moved to a local, better equipped nursing home, where she is now able to socialize, make friends, and participate in most activities, including computers, art, and bingo.